**Application or Docket Number** 

## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

-		CLAIMS AS	FILED - (Column		(Column 2)			SMALL ENTITY TYPE		OR	OTHER THAN	
TOTAL CLAIMS							[	RATE	FEE	]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			12 minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			<i>Z</i> minus 3 =		*			X42=		OR	X84=	
MULTIPLE DEPENDENT CLAIM P			RESENT					+140=		OR	+280=	
* <b>i</b> f	the difference	in column 1 is	less than zero, enter "0"			olumn 2	į	TOTAL		OR	TOTAL	
	С	LAIMS AS A	MENDED - PART II					TOTAL		Jon	OTHER	THAN
<u> </u>		(Column 1)		(Colu	mn 2)	(Column 3) SMA			ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	. 9	Minus	** 2	0	=		X\$ 9=		OR	X\$18=	
	independent	* 2	Minus	***	3	=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF MI	PENDEN	T CLAIM			+140=		OR	+280=		
		! !					Ł	TOTAL			TOTAL	
(Column 1) (Column 2) (Column 3)								VDDIT. FEE		10.,	ADDIT. FEE	<u> </u>
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI		PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	F OL 4414	=		X42=		OR	X84=	
<u> </u>	FIRST PRESE	NTATION OF MI	JUIPLE DE	PENDEN	CLAIM		<b>!</b>	+140=		OR	+280=	
	•						<b>L</b>	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVI PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	·	=		X42=		OR	X84=	
Ľ	FIRST PRESE	NTATION OF MI	JLTIPLE DEI	PENDEN	T CLAIM		<b>!</b> ├	+140=				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280= TOTAL	
**	If the "Highest Nu	mber Previously Pa mber Previously Pa	aid For IN THI	S SPACE	is less tha	n 20, enter "20."	. A	TOTAL DDIT. FEE		OR	ADDIT. FEE	
		ber Previously Pai					er four	nd in the app	ropriate box	c in col	lumn 1.	